AN APPROACH TO AGING BEGUN IN ADOLESCENCE

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My education on the acceptance of the grim twins, old age and death, was started when I was about 13. My father handed me William Cullen Bryant's *Thanatopsis* to read, and he read to me Thomas Browne's verse which begins, "Sleep is a death, O let me try,/By sleeping what it is to die." These poems, by men of 30, proved a good introduction to two poems by men dying of tuberculosis. John Keats' "When I have fears that I may cease to be/Before my pen has glean'd my teeming brain. . . ." showed how hard it would be to leave life's tasks unfinished. But the theme of *Thanatopsis* was supported by Swinburne's "From too much love of living,/From dread and fear set free,/ We thank with this thanksgiving/Whatever gods may be. . . ." and Stevenson's "Under the wide and starry sky/Dig the grave and let me lie:/Glad did I live and gladly die/And I laid me down with a will./ This be the verse you grave for me:/Here he lies where he longed to be;/Home is the sailor, home from the sea,/And the hunter home from the hill."

Thanks to parental guidance, I was not unprepared to die when, at 18, I met the dead and dying in casualty clearing stations near Verdun. Years later Siegfried Sassoon recalled his shock when he saw his first dead soldier on his way up to the lines in Flanders. But he excused this weakness of himself as a young infantry officer by noting that he did not then realize death had spared these men the common fate, "an unlovely struggle against unfair odds, ending in a cheap funeral." It was only two years later that city hospital rounds taught me that lesson and drove home the full meaning of the Greek aphorism: "It is the common lot of man to go down to Orcus unsung."

My youthful mind had been led by young poets to think that aging might be a desirable state. Milton at 21 had written "And may at last my weary age/Find out the peaceful hermitage,/The hairy gown and mossy cell/Where I may sit and rightly spell/Of every star that Heav'n

doth shew,/And every herb that sips the dew;/Till old experience do attain/To something like prophetic strain." Rupert Brooke, about to die in the war, wrote of those who had already died: "These laid the world away; gave up the years to be/Of work and joy, and that unhoped serene,/That men call age; and those who would have been,/Their sons, they gave, their immortality." To those about to die, old age seemed marvelous.

But not to Socrates at 70, for Xenophon tells us that when he had been sentenced to die and his friends asked why he had not tried to defend himself at his trial, he said he preferred the lethal drink to old age, the sink into which all miseries flowed. The Hebrew philosopher Sirach (Ecclesiasticus) agreed: "Death, how kind is thy release to a man broken in age, impoverished, losing strength and hopeless about everything." Behind the young poets' silver lining, the cloud banks of aging were dark indeed. But these shadows on my future I did not suspect until I began to walk the wards of hospitals at home.

When I was assigned to work in physical diagnosis at City Hospital 2 in St. Louis, then unprepared by Xenophon or Ecclesiasticus, I learned what it was like to be impoverished and hopeless about everything. In my Osler I read that pneumonia was the friend of the aged, carrying them off in brief illnesses and sparing them worse fates. Later I learned that Osler had reached this conclusion as he approached 50; earlier editions had described pneumonia as the enemy of the aged. Some of the patients I studied were old and decrepit before they were 60. When Charles de Gaulle wrote, "Old age is a shipwreck," I could have said that I had known that for decades. But I had also learned that there was a silver lining, that most of the aged are not unhappy most of the time. Some of them, after being shipwrecked, made the best of life on desert islands. My seven aging aunts were healthy and cheerful, and on ranches in California and Arizona I had met men such as Alfredo Olivera and Jim Owens, who were vigorous and full of wisdom as they approached 80. In the next decade I learned about the curve of distribution of aging, with only a few prematurely aged on the left, most of us in the middle, and a few people, remarkably young and productive after 85, on the right.

Scores of centuries before Ecclesiasticus wrote it down, poverty was obviously the greatest bane of the aged. In our profession we think "it can't happen to us," but this comforting thought has been denied

me. In 1924 I saw many distinguished Viennese physicians who had one dollar of buying power still left in the bank for every 17,000 they had had in 1914. I was sobered by the thought that I should be lucky if the money I had started putting into savings and annuities at the age of 30 would bring me only a little less in buying power than what I had deposited. And I am lucky, because one depression, two declared wars, six or seven interventions, and two trips made by astronauts to the moon have left me at 72 with almost 80% of the buying power of my savings still left. Had I been a Swiss professor it would have been about 200%, but my sons would not have had the privilege of defending democracy in Asia, Africa, the Caribbean, or even in Europe, or of being first to step on and return from the moon. When one does much on credit, not on taxes, one's savings shrink. Thus the aged pay for their pride and folly; my generation of Americans has fired more cash at more targets and at more distant targets than all the nations in history together. A fine spree, and not such a bad headache! Medicare and Social Security have done something to temper the winds of poverty for old shorn sheep, but the main protection from this scourge of the aged has been learning to live modestly and working as late in life as possible, for wages do rise with living costs.

With my first attack of gout, at 32, I knew that I was not to escape involution. It was time to accept the facts of life and learn to live with aging as one does with bad weather. The facts were well known. Aging is the process by which nature removes creatures no longer able to protect their young, and lets other birds and beasts consume them. Man alone has a few years of life left after his youngest child can fend for himself. Man is as old as his ectoderm, but his outward aging is less significant than the aging of the infolded nervous system, with its irreplaceable neurones. Counts of the medullated fibers in spinal nerves shows a steady decline beginning at 20. The cerebral cortex loses thousands of neurones a day after maturity. This is why athletes lose prowess, even in atraumatic sports, so swiftly in their late 20's and early 30's, and why poets, musicians, scientists, and inventors reach peak performance before 35 and can only hope to stay on a plateau with a gently falling slope after 40.

We are lucky if gout, or baldness, or grey hairs give us warning, so we can learn to bend and not be broken by the wind of senescence. Awakened by gout, I took off half the 45 pounds I had put on between

24 and 32 and, after a few years without bacon and eggs, butter, and cheese, found I had lost the gout. Not until 59, after a year of high living with hospitable friends in California, did it recur, soon followed by an episode of coronary obstruction. Then I took off the other 25 pounds, got back to adolescent weight, and became a gourmet of vegetables and fish, corn oil and fruit, lean meat and skim milk. The foods unknown to my forebears before 1600 A.D.—potatoes, sugar, and distilled drinks—were also avoided. The physical side of the battle with aging had become a real challenge. To the aging man, as to the mountain climber, the difficult paths are the most fun, and we find them nearer home. But this does not restore any neurones.

When Osler retired from his professorship at Johns Hopkins, at the age of 56, he gave an address titled *Fixed Period*. He told his astonished auditors that it would be better for society if, as a matter of course, all men over 60 were retired from business, professional, and political life. It is customary to cite Clemenceau in World War I, Churchill in World War II, and Adenauer in the recovery of West Germany, to prove that old men are invaluable. For most of their lives these men were not in power but in opposition. We grow strong swimming against the stream, and they were studying, thinking, and writing while the men in power were scheming and talking. Had they been allowed to govern 30 years sooner, both world wars might have been avoided. There are no examples of men in power before 50 who did more than hang on and retard progress after 70.

Like Osler, I believed no one should be a department executive in a medical school for more than 20 years. After 16 years in that role I was able to resign and to work under Perrin Long, the most effective and one of the most charming executives I had ever encountered. At 65 I left this post, because I did not believe in the state-university policy of retirement at 70. A competent clinician, radiologist, or pathologist can earn more off the faculty than on it, and should not be treated like a Latin professor, who cannot. In medical schools the retirement age should be 62, when my father and Harvey Cushing chose to retire from being department heads and to leave their hospital posts. Perhaps the Oslerian 60 would be still better. My father, like Osler, retired to a distant small town. There he practiced until he was 86. I also might have been able to find work in a small community. but since my wife, like George M. Cohan, believes that "When you're away from old

Broadway, you're only camping out," I did not need to move. My mother, in St. Louis, had been longing for Pasadena for a decade.

A position at the Brooklyn V.A. Hospital had been unfilled for more than a year, so I felt justified in acting as chief of medicine there for the next five years. But when the Biblical age of three score and ten arrived, I was sure my assistant chief could handle the task better. Just at the right time I was invited to join the New York V.A. Hospital as full-time consultant, the same post Dr. Isidore Snapper holds in Brooklyn. Under this plan the chief of service can protect his patients and house staff from the follies of my old age, or can put me to work if he feels that "old experience might attain to something like prophetic strain." Fortunately I was encouraged to spend all my time in the outpatient clinic, where I could put to good use my own devices for recording vascular sounds and pulsations, and the shaking of the body by the heart beat. This is an obsession which amuses me and harms no one. In the outpatient clinic one sees none of the desperately ill old patients, but quite a few men over 70, working hard or enjoying life in spite of pacemakers or prosthetic heart valves.

Since my first 10 years on the Stanford staff were spent in the outpatient clinic, this return bears out my thesis that graceful aging should reverse maturation and lead eventually to a second youth and childhood when one may study and play but not be expected to work. At seven years a child's brain is considerably heavier and has many more neurones than that of a senator (or professor) of 70. In second childhood perception and memory are not as good as in the first one, but we may profitably study nature, as Milton hoped to do in his "mossy cell." From this he was barred by his cataracts, as are so many old people. But today cataract surgery restores 20-20 vision to many of us. If one has developed interests in nature, gardens, or man with his incredible history, there will be plenty to do in one's second childhood. Those who have only their work as a hobby are doomed to emulate the aged firehorse, trotting after the bell even when the fire engine has become motorized.

To prepare for the physical problems of aging one must begin early in life to deny the presence of minor or familiar aches and pains. This training made gout, cervical radiculitis, angina, and three operations for ills of the aging easy to tolerate and easy to forget. Even more important is the denial of fatigue. Sleepiness, yes; weariness, no! Walking

hour after hour is no more tiring than breathing. To see the world and enjoy the leisure of the aged, fatigue, aches, and pains must be ignored and, if one starts early, this becomes second nature by 50. Of course, if the femoral heads crumble or one has a stroke, more difficult adjustments must be made. But I have seen friends meet these bludgeonings of chance with grace and even grim humor, and I hope I can deal reasonably well with similar accidents of aging.

Most to be feared is the slowly progressive tumor or failure of heart or lungs. This is like the dread in 1917 that I might not die swiftly, but be mangled, maimed, or blinded, as were so many young men I saw. Saint-Exupery had not yet pointed out that only the unknown terrifies us, but that when we meet it, it is no longer unknown. And I was not able to feel, like the author of *Invictus*, that the ". . . menace of the years,/Finds and shall find me unafraid." Henley, who had been subjected to repeated operations for tuberculosis of bone, had confronted the menaces of pain and death over and over again. Most of us have not, and I was and still am a confirmed and practicing coward. When very badly frightened I have been able to do my job, and I hope I can do as well if confronted by the worst. But I hope not to be tested too often, for I am 10 years older than Cicero was when Brutus advised against having him join in Caesar's assassination because he had reached an age "when the boldest begin to flinch."

The suppression of pain is not without some risks. Two of my maternal aunts lived near us in San Francisco. One evening one of them phoned me to report: "Sally doesn't want supper this evening, but says she's all right." I dashed over to find a temperature of 102° and signs of peritonitis. Prompt exploration showed a perforated sigmoid diverticulum, but she recovered quickly, in spite of pulmonary embolism, within 10 days. In those who enjoy old age and suppress its discomforts, loss of appetite for a single meal may reveal a lethal disorder. Two of my cardiological friends had acute anorexia as the initial symptom of myocardial infarction, fatal within the week for one of them. But if one shares Osler's view of the kindness of swift killers of the aged, the risks of suppressing symptoms are far outweighed by the advantages. I should be glad to have as my obituary Samuel Johnson's verses on the death of Robert Levet, "a Practiser of Physic . . . Obscurely wise and coarsely kind . . ./His vigorous remedy displayed/The power of art without the show . . ./His frame was firm—his powers were

bright,/Though now his eightieth year was nigh./Then with no fiery throbbing pain,/No cold graduations of decay,/Death broke at once the vital chain,/and freed his soul the nearest way."

But even when we have had a touch of coronary disease, the odds are five to one against this kind release and we must plan on living. We can get some consolation from Pogo's view that "You don't know how lucky you are to be alive until you realize you aren't stuck with it forever." This may make living, even in a decaying metropolis of a decadent republic, the source of quiet satisfaction. Aging may be even more cheerful if one accepts Joseph Conrad's belief that the object of creation is not moral but purely spectacular, "a spectacle for awe, adoration, love, or hate, if you like, but in this view—and in this view alone—never for despair."